SHAMIT: COMPLETED APPLICATION, TAX Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138 Bayfield County APPLICATION FOR PERMIT
BAYFIELD COUNTY, EVISCONEIN Date Start Received JUN 26 2017 Bayfield Co. Zoning Dept. , 50/Age CHE THE Permit Refund: Date: Amount Paid: APPLY SOFT 7:25:17

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. \$50,000 of Completion
* include Michael C Welchy
Address of Property: TYPE OF PERMIT REQUESTED- X LAND USE X **Proposed Construction: Existing Structure:** Authorized Agent: (Person Sig ☐ Non-Shoreland **≯**Shoreland Contractor: Municipal Use donated time & Value at Time 37.6 PROJECT LOCATION Residential Use Commercial Use material Proposed Use Section Rec'd for Issua Sch 200 mg Secretarial Staff 1/4, 00 2005 C 512 XAddition/Alteration (if permit being applied for is relevant to it) $oldsymbol{leph}$ is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue ☐ Is Property/Land within 300 feet of River, Stream (Incl. Intermittent)

Creek or Landward side of Floodplain? If yes—continue → Legal Description: Property Run a Business on Relocate (exi Conversion New Construction , Township R P Project 1/4 $\mathbf{x} \Box$ Hodac K Other: (explain) isting bldg) Accessory Building Addition/Alteration (specify) Special Use: (explain) Principal Structure (first structure or Residence (i.e. cabin, hunting shack, Conditional Use: (explain) Addition/Alteration (specify) Mobile Home (manufactured date) Bunkhouse w/ (☐ sanitary, or ☐ Accessory Building √ 17 N, Range (Use Tax Statement) Gov't Lot with a Deck with (2nd) Deck with Loft with Attached Garage with (2nd) Porch with a Porch 2-Story Foundation No Basement Basement 1-Story + Loft # of Stories ner(s)) □ SANITARY Lot(s) (first structure ω (specity) 817-Contractor Phone: 10540 S Tax ID# (4-5 Agent Phone: Mailing Address SM Proposed Structure garage addition Length: sleeping quarters, or cooking & food prep facilities Length: Year Round □ PRIVY 2034 9 20198 Seasonal Town of: Vol & Page Use LouglakeRo property) Ŧ 30 6193 Plumber: Agent Mailing Address (include かって CONDITIONAL USE Distance Structure is from Shoreline : feet Distance Structure is from Shoreline: **X** bedrooms None w N Lot(s) No. 9 707 Iron River, WI Susul City/State/Zip Mew Likeld Width: Width: ∑ Sanitary (Exists) Specify Type (County)
 ☐ Privy (Pit) or Vaulted (min 200 gallon) None (New) Sanitary Specify Type: Block(s) No. Municipal/City Compost Toilet 36 ECITY/State/Zip); Well SPECIAL USE Sewer/Sanitary System
Is on the property? 38 What Type of service contract) Document #: Subdivision: Dofor 3 I 5484 7 corded Deed (i.e. # feet 30 **Dimensions** Is Property in Floodplain Zone? □ B.O.A Sex × ×l×l×l× Flecks Height: Height: XNo Cell Phone: (7/5) Plumber Phone 292-4975 Telephone gned by Register of Deeds) OTHER ₽ P Ĉ 6 780 Are Wetlands
Present?

Yes Square Footage Well X No Lake Water 5201 City

(If there are Multiple Own In the Deep Owners faust sign or letter(s) of authorization must accompany this application)

Owner(s):

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES and to the best of my (our) knowledge and belief it is true, correct a ram (are) responsible for the detail and accuracy of all information | (we) arm (are) providing and that it will be relied upon by Bayfield County in determining whether to issue; may be a result of Bayfield County reliying on this information | (we) arm (are) providing in or with this application. I (we) consent to county officials charged with administer above described property at any reasonable time for the purpose of inspection.

Authorized Agent: are signing on b ehalf of the ow er(s) a any this ap

Address to send permit

105405

towo 7

OK &

100

VPV

Date 6 9

rect and complete. I (we) acknowledge that I (we) ssue a permit. I (we) further accept liability which ristering county ordinances to have access to the

Date 7000

Attach
Copy of Tax Statement property send your Recorded Deed

				The second differences									
Sigi	Date c Condit	Ins W	lss Granis	one mar	Set Set Set on the	Se Se	Se			metro	2		
nature d For S	Date of Inspe Condition(s):	/as Pro	Permit #: Permit #: Is Parcel Is Stru Granted b	previous ked by a	etback tetback	back f	Setback f Setback f	Please			水.		
Signature of Inspector: Hold For Sanitary:	J 6 7 3 2	Was Proposed Bu Inspection Record:	Issuance Information (Permit Denied (Date): Permit #:	lacement ly surveye licensed si (9)	Setback to Septic Tani Setback to Drain Field Setback to Privy (Porti Prior to the placement or const other previously surveyed corn	rom th	from th				Aspensorzanie propi		(2) (2) (3) (4) (5) (6) (7)
ector:	on:	is Parce Buildin	rmati)ate):)b))b))ub-Sta mon O Non-Cc	t or const ed come surveyor Sta	n Field (Port tor consi	he Nor he Wes	ie Cen	Set De					18
	A Symming as	el Lega Ig Site I	Permit Denied (Date): Permit #: 17 0803 Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Granted by Variance (B.O.A.)	r to the or at the or I	Tank or H Field Portable, (construction of d corner or ma	Setback from the North Lot Line Setback from the South Lot Line Setback from the West Lot Line Setback from the East Lot Line	terline	etbacks: (nr					Show Location Show Location Show Location Show Location Show: Show: Show: Show: Show any (*): Show any (*):
		Was Parcel Legally Created Was Parcel Legally Created Was Proposed Building Site Delineated Nas Proposed Site Delineated	Permit Denied (Date): Permit #	onstru	Setback to Septic Tank or Holding Tank Setback to Drain Field Setback to Privy (Portable, Composting) Prior to the placement or construction of a structure within ten (10) feet of the other previously surveyed corner or marked by a licensed surveyor at the own	Line Line ne	the Centerline of Platted Road the Established Right-of-Way	complete (1) – (7) above (prior to continuing) (8) Setbacks: (measured to the closest point) Description Mea			\$ -		Show Location of: North (N) on Plot Plan Show Location of (*): All Existing Structures on your Property Show: Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (I (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond Show any (*): (*) Wetlands; or (*) Slopes over 20%
Hold For TBA:	HE SOUTH	A Commercial Commercia	Ity Use	pense. Propo : All La	Tank sting) sting with	5	atted F	ve (pri		_{manner} .			<u>chyo</u> of: : of (*):
	onditio	X Yes	Only) (Deed of (Fused/C	e than te irveyed c sed Lo and Use If New	in ten (1	7	load	or to a		=0	NAME OF THE PARTY		Pr
	ons Atta		Only) (Deed of Record) (Fused/Contiguou	orner, or cation Cati	0) feet of			ontinui e close		1			opose opose orth (\(\) Drive () Drive () Well () Well () Wetle () Wetle () Wetle () Wetle ()
United States	7 8 =	6	Only) Sanitan Reason Permit Deed of Record) Drecented Drece	ret but les verifiable n(s) of its Exp Two F Two F	the min		26	DAME O		8.	V _i		roperty (regardless of what you are an Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (All Existing Structures on your Proper (*) Well (W); (*) Septic Tank (ST); (*) (*) Lake; (*) River; (*) Stream/Creek; (*) Wetlands; or (*) Slopes over 20%
Application of the second	nspected	£	Sanitary Number: 2 Reason for Denial: Permit Date: Dr DNO NO NO Dus Lot(s))	New (amily L	innum req expense.	. 12 pg =	50+	oint)	(<u>u</u>]			less of struction that lot Pla lot Pla lot Pla lot Pla victure ') Sept ver; (*) S
Hold For Affidavit:	S No.		dumber:	Department of the policy (30) for the policy (30) for the policy (30) for the policy (31) for the policy (uired set		77	ent L		» L		2 2	of what you are applying for) ction lan Frontage Road (Name Front res on your Property eptic Tank (ST); (*) Drain Field (*) Stream/Creek; or (*) Pond Slopes over 20%
or Affid	MES		per J	eet from ent by us uction uction ar fron g: ALL ate or	Feet Feet Feet etback, the	Feet Feet	Feet		K S.		-(j)	ST K	you ar you ar you ar you ar you Pro our Pro k (ST); k (ST); m/Cre over 2
avit:	o they	W. e	Mitiga Mitiga Previo	the mini of a cor Septil the D Munic	Se	Se EH	Se Se	Siveris			D.T.	3 5	e appl ad (Na operty (*) Dr (*) or ek; or
	& need	ere Pro	ation F	rected corrected	Setback	Setback fr 20% Slope Elevation	Setback Setback Setback	ا مِّي	REAL STREET		2	33	<u>ying fo</u> me Fro ain Fie (*) Po
		Were Property Lines Represented by Owner Was Property Surveyed	Mitigation Required Mitigation Attached Mitigation Attached	report reconstruction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measurement to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the veryor at the owner's expense. Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), a NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	Setback to Well	from Wetland ope Area on proof Floodplain	Setback from the Lake Setback from the River Setback from the Bank		1013	لعا	2	7 7 5	roperty (regardless of what you are applying for) Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) ar (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%
Hok	THE PROPERTY OF THE PROPERTY O	ines R	# of bedrooms: # Of bedrooms: # Of bedrooms	back, the om a kno prain fi pr	the setb	rom Wetland e Area on pro of Floodplain	the Lake (the River, the Bank	Changes in plans must be a	15	套			. Road:
Hold For Fees:		aprese as Proj	of bedro	boundar www.com/ eld (DI eld (DI nstruct d To Er	ack must	etland on property	er, Str	es h plans in		مرياً ا		7	lolding
es:	San meter	nted by perty S	(B.O.A.)	er within	be meas	tv	(ordinary h	mu sing	6	7	, in the second		Tank
	3	/ Owne		soo feet ding T: Use ha The Un	ured mu		high-w Creek	ist be a	, ,	·			(HT) a
			Sanital Affidavit Affidavit	ank (His not k	st be visit		ater m	ipprov	,		-	deleter men et de men et d	nd/or
Date	ate of	☐ Yes	Sanitary Date:	T), Priv	visible from (mark)	ed by t			D	AMERICAN AND AND AND AND AND AND AND AND AND A	ıd/or (*) Privy (P)
Date of Approval	Date of Re-Inspection:	Tyes ZYes ZYes Zoning District Lakes Classification (Sanitary Date: Which is a second of the sec	be meas ite of the N(P)	one previo			الم			***		vy (P)
proval	pection			structur	lously sur	NA X Yes NA	707	nning (r Rij				
		P 188	Yes	ior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from the previously surveyed corner to the other previously surveyed corner within 500 feet of the proposed site of the structure, or must be arked by a licensed surveyor at the owner's expense. (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require normits.	O Javeyed CC		226	ming & Zoning D					
		Bistrict (2)	NO N	st be	Feet praer to the	Feet Feet	Feet Feet Feet	approved by the Planning & Zoning Dept.			V		*
		00			ie Ct	P P	# # #						

City, Village, State or Federal May Also Be Required

AND USE - X SANITARY - 367316 SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Location:	-	1/4	of		1/4	Section	3	Township	47	N.	Range	8	W.	Town of	Iron Rive
Gov't Lot			L	_ot	25	Blo	ock	Su	bdivisio	on D	ufur Fle	cks	1 st Ac	dd to Lon	g Lake (

For: Residential Addition / Alteration: [1- Story; Garage Addition / New Roof Line (30' x 26') = 780 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting

Condition(s): No additional bedrooms allowed without verification of septic system for additional daily wastewater flow.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

> Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete. This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Jennifer Murphy

Authorized Issuing Official

July 25, 2017

Date